

## CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER <b>27-1730687</b>		REPORT FILED ON BEHALF OF		CANDIDATE <input type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>Corry Democratic Party</b>						
STREET ADDRESS <b>c/o Albert Wood 469 E. South St.</b>						
CITY <b>CORRY</b>		STATE <b>PA</b>		ZIP CODE <b>16407</b>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>						MO. DAY YEAR
		DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
		MO. DAY YEAR <b>01 01 17</b> to <b>12 31 17</b>		2018 JAN -3 AM 11:21 ERIE COUNTY VOTER REGISTRATION		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <b>4505.95</b> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <b>0</b>				
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>				

## AFFIDAVIT SECTION

## PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
**11** DAY OF **December** 20**17**

**Albert M. Wood**  
 SIGNATURE OF PERSON SUBMITTING REPORT  
**Albert m. wood**  
 PRINTED NAME

MY COMMISSION EXPIRES **814** **881-4807**  
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL  
 MO. PAUL J. CARNEY JR., NOTARY PUBLIC  
 CITY OF CORRY, ERIE COUNTY  
 MY COMMISSION EXPIRES APRIL 16, 2018

## PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF CANDIDATE  
 \_\_\_\_\_  
 PRINTED NAME

\_\_\_\_\_  
 SIGNATURE  
 MY COMMISSION EXPIRES \_\_\_\_\_  
 MO. DAY YR.

\_\_\_\_\_  
 AREA CODE  
 \_\_\_\_\_  
 DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation  
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280